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34TH FLOOR
500 WEST MADISON STREET
CHICAGO, ILLINOIS 60661

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TO: Group Art Unit 2192
Examiner M.J. Yigdall

FAX NO.: 571 273 8300

FROM: Kevin E. Borg

USER ID: 8078

CLIENT: 1917

MATTER: 14319US02

Number of Pages This Transmission (Including Cover Page): 14

I hereby certify that the attached correspondence is being sent via facsimile transmission to the United States Patent and Trademark Office on May 23, 2006.


Kevin E. Borg
Reg. No. 51,486

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/701,848
		Filing Date	November 5, 2003
		First Named Inventor	Rao
		Art Unit	2192
		Examiner Name	M.J. Yigdall
Total Number of Pages in This Submission		13	Attorney Docket Number 14319US02
ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
		<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
Remarks		Petition for three-month extension of time is filed in duplicate herewith	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	McAndrews Held & Malloy, Ltd.		
Signature	<i>Kevin E. Borg</i> reg. # 51,486		
Printed Name	Kevin E. Borg		
Date	May 23, 2006		
CERTIFICATE OF FAX TRANSMITTAL			
I hereby certify that this correspondence is being sent via facsimile to Examiner M.J. Yigdall at the United States Patent and Trademark Office, fax No. 571 273 8300, on May 23, 2006.			
Name (Print/type)	Kevin E. Borg	Registration No. (Attorney/Agent)	51,486
Signature	<i>Kevin E. Borg</i>	Date	May 23, 2006

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FEE TRANSMITTAL for FY 2006		Complete if Known	
Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818). <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/701,848
		Filing Date	November 5, 2003
		First Named Inventor	Rao
		Examiner Name	M.J. Yigdall
		Art Unit	2192
TOTAL AMOUNT OF PAYMENT (\$) 510		Attorney Docket No.	14319US02

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METHOD OF PAYMENT (check all that apply)

☐ Check
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☒ Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

☒ Charge Fee(s) indicated below
 ☐ Charge Fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fees(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES		FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
Application Type	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)		
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee(\$)	Fee(\$)
Each claim over 20 (Including Reissues)	50	25
Each independent claim over 3 (Including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims -20 or HP Extra Claims x Fee(\$) = Fee Paid (\$)
 HP = highest number of total claims paid for, if greater than 20

Indep. Claims -3 or HP Extra Claims x Fee(\$) = Fee Paid (\$)
 HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

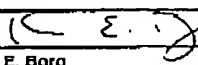
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee(\$)	Fee Paid(\$)
-100	/50	(round up to a whole number)	x	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for three-month extension of time 510

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	51,486	Telephone	(312)775-8000
Name (print/type)	Kevin E. Borg	Date	May 23, 2006		